

<b>CMS Manual System</b>	<b>Department of Health &amp; Human Services (DHHS)</b>
<b>Pub 100-20 One-Time Notification</b>	<b>Centers for Medicare &amp; Medicaid Services (CMS)</b>
<b>Transmittal 2198</b>	<b>Date: November 9, 2018</b>
	<b>Change Request 10983</b>

**SUBJECT: Enhancing the Verification Process of Common Working File (CWF) Part A Provider Inquiries**

**I. SUMMARY OF CHANGES:** The purpose of this change request is for CWF to modify the provider inquiries and establish a National Provider Identifier (NPI) and submitter Identification (ID) verification process similar to those established in the HIPAA (Health Insurance Portability and Accountability Act) Eligibility Transaction System (HETS).

**EFFECTIVE DATE: April 1, 2019 - NPI verification; July 1, 2019 - Submitter ID verification**

*\*Unless otherwise specified, the effective date is the date of service.*

**IMPLEMENTATION DATE: April 1, 2019 - Implement NPI verification BRs 1 through 4; July 1, 2019 - Implement Submitter ID verification BRs 5 through 8**

*Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.*

**II. CHANGES IN MANUAL INSTRUCTIONS:** (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED-Only One Per Row.

<b>R/N/D</b>	<b>CHAPTER / SECTION / SUBSECTION / TITLE</b>
N/A	N/A

**III. FUNDING:**

**For Medicare Administrative Contractors (MACs):**

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

**IV. ATTACHMENTS:**

**One Time Notification**

# Attachment - One-Time Notification

Pub. 100-20	Transmittal: 2198	Date: November 9, 2018	Change Request: 10983
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**SUBJECT: Enhancing the Verification Process of Common Working File (CWF) Part A Provider Inquiries**

**EFFECTIVE DATE: April 1, 2019 - NPI verification; July 1, 2019 - Submitter ID verification**

*\*Unless otherwise specified, the effective date is the date of service.*

**IMPLEMENTATION DATE: April 1, 2019 - Implement NPI verification BRs 1 through 4; July 1, 2019 - Implement Submitter ID verification BRs 5 through 8**

## I. GENERAL INFORMATION

**A. Background:** Medicare Part A providers, clearinghouses and billing agents can request the Part A Medicare beneficiary eligibility information from CWF. There are five Part A eligibility queries available through the CWF host.

The Centers for Medicare & Medicaid Services (CMS) is directing CWF to modify each Part A eligibility inquiry and establish verification processes similar to those established in the HIPAA (Health Insurance Portability and Accountability Act) Eligibility Transaction System (HETS). This change will align the verification process for Part A eligibility data across the CMS systems. Thus, with the implementation of this change request, the CWF host will verify the status of the National Provider Identifier (NPI) and the submitter Identification (ID) against information provided by the Provider Enrollment, Chain and Ownership System (PECOS) and HETS, respectively.

**B. Policy:** Not Applicable

## II. BUSINESS REQUIREMENTS TABLE

*"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.*

Number	Requirement	Responsibility								
		A/B MAC			D M E M A C	Shared- System Maintainers				Other
		A	B	H H H		F I S S	M C S	V M S	C W F	
10983.1	The contractor shall modify the HIQA, HIQH, and HUQA input screens to change the label "CLAIM NUMBER" to "HIC/MBI NUMBER".								X	
10983.2	PECOS shall send a full extract of Medicare Part A providers NPI file to the CWF hosts daily.  The file names are: <ul style="list-style-type: none"> <li>Input at the BDC – <ul style="list-style-type: none"> <li>Test/Validation: T#EFT.ON.FISSEXT.NLR.Dyymmdd. Thhmmsst</li> </ul> </li> </ul>								X	CWF Host, PECOS

[illegible]

Number	Requirement	Responsibility								
		A/B MAC			D M E  M A C	Shared- System Maintainers				Other
		A	B	H H H		F I S S	M C S	V M S	C W F	
10983.6	The contractor shall modify the CWF provider inquiry screens to add 'Submitter ID' as a required field.  NOTE: Submitter ID is 8-bytes alpha-numeric field.								X	
10983.6.1	The contractor shall  1. add 'Submitter ID' as required field in DDE (Direct Data Entry) for Medicare beneficiary inquiries, 2. modify the DDE associated copybook(s) to add the required 'Submitter ID' field, 3. add necessary logic to accept the 'Submitter ID' in DDE and IVR/ARU (interactive voice response/automatic response unit), and 4. add necessary logic to pass 'Submitter ID' on HUQA inquiry to CWF.					X				
10983.6.2	The contractor shall update the FISS IVR/ARU to add 'Submitter ID' as a required field.  NOTE: HETS IVR/ARU already contains 'Submitter ID' as a required field and MACs mostly use HETS IVR/ARU.	X		X						
10983.7	HETS shall provide the current business rule(s) for verification of a submitter ID to the contractor by January 18, 2019.								X	HETS
10983.7.1	The contractor shall modify the CWF system to apply the HETS business rules to all CWF provider queries, ELGA, ELGH, HIQA, HIQH, and HUQA, for verification of a submitter ID.								X	
10983.8	The contractor shall reject the CWF provider inquiry request(s) if the required submitter ID provided is either not present or currently not active on the HETS Submitter IDs list.  NOTE: The contractor shall provide a switch for CMS with a provision to turn ON (Y) or OFF (N) the submitter ID verification within CWF.								X	

### III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			D M E M A C	C E D I
		A	B	H H H		
10983.9	MLN Article: CMS will make available an MLN Matters provider education article that will be marketed through the MLN Connects weekly newsletter shortly after the CR is released. MACs shall follow IOM Pub. No. 100-09 Chapter 6, Section 50.2.4.1, instructions for distributing MLN Connects information to providers, posting the article or a direct link to the article on your website, and including the article or a direct link to the article in your bulletin or newsletter. You may supplement MLN Matters articles with localized information benefiting your provider community in billing and administering the Medicare program correctly. Subscribe to the “MLN Matters” listserv to get article release notifications, or review them in the MLN Connects weekly newsletter.	X		X		

#### IV. SUPPORTING INFORMATION

**Section A: Recommendations and supporting information associated with listed requirements:** N/A

*"Should" denotes a recommendation.*

X-Ref Requirement Number	Recommendations or other supporting information:

**Section B: All other recommendations and supporting information:** N/A

#### V. CONTACTS

**Pre-Implementation Contact(s):** Vinay Vuyyuru, 410-786-9111 or Vinay.Vuyyuru@cms.hhs.gov

**Post-Implementation Contact(s):** Contact your Contracting Officer's Representative (COR).

#### VI. FUNDING

##### **Section A: For Medicare Administrative Contractors (MACs):**

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

**ATTACHMENTS: 0**